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4.13 Required Provider Agreement

With respect to agreements between the Medicaid agency and each provider furnishing services under the plan:

- 42 CFR 431.107 (a) For all providers, the requirements of 42 CFR 431.107 and 42 CFR Part 442, Subparts A and B (if applicable) are met.
- 42 CFR Part 483 1919 of the Act (b) For providers of NF services, the requirements of 42 CFR Part 483, Subpart B, and section 1919 of the Act are also met.
- 42 CFR Part 483, Subpart D (c) For providers of ICF/MR services, the requirements of participation in 42 CFR Part 483, Subpart D are also met.
- 1920 of the Act (d) For each provider that is eligible under the plan to furnish ambulatory prenatal care to pregnant women during a presumptive eligibility period, all the requirements of section 1920(b)(2) and (c) are met.



Not applicable. Ambulatory prenatal care is not provided to pregnant women during a presumptive eligibility period.

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1902 (a)(58)

1902(w)

4.13 (e)

For each provider receiving funds under the plan, all the requirements for advance directives of section 1902(w) are met:

- (1) Hospitals, nursing facilities, providers of home health care or personal care services, hospice programs, managed care organizations, and prepaid inpatient health plans, are required to do the following:
 - (a) Maintain written policies and procedures with respect to all adult individuals receiving medical care by or through the provider or organization about their rights under State law to make decisions concerning medical care, including the right to accept or refuse medical or surgical treatment and the right to formulate advance directives.
 - (b) Provide written information to all adult individuals on their policies concerning implementation of such rights;
 - (c) Document in the individual's medical records whether or not the individual has executed an advance directive;
 - (d) Not condition the provision of care or otherwise discriminate against an individual based on whether or not the individual has executed an advance directive;
 - (e) Ensure compliance with requirements of State Law (whether

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45(b)

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statutory or recognized by the
courts) concerning advance
directives; and

- (f) Provide (individually or with
others) for education for staff
and the community on issues
concerning advance directives.

- (2) Providers will furnish the written
information described in paragraph
(1)(a) to all adult individuals at
the time specified below:

- (a) Hospitals at the time an
individual is admitted as an
inpatient.
- (b) Nursing facilities when the
individual is admitted as a
resident.
- (c) Providers of home health care or
personal care services before the
individual comes under the care of
the provider;
- (d) Hospice program at the time of
initial receipt of hospice care by
the individual from the program;
and
- (e) Managed care organizations and prepaid
inpatient health plans at the time of enrollment
of the individual with the organization.

- (3) Attachment 4.34A describes law of the
State (whether statutory or as
Recognized by the courts of the
State) concerning advance directives.

Not applicable. No State law
Or court decision exist regarding
advance directives.

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